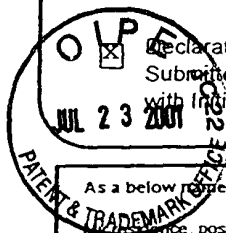


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PTO/SB/01 (8-96)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

| | |
|------------------------|-------------------|
| Attorney Docket Number | 146.1365 |
| First Named Inventor | F. BORDON-PALLIER |
| COMPLETE IF KNOWN | |
| Application Number | PCT/FR99/02739 |
| Filing Date | 11/9/99 |
| Group Art Unit | |
| Examiner Name | |



☒ Declaration OR
Submitted
with Initial Filing
☐ Declaration
Submitted after
Initial Filing

As a below named inventor, I hereby declare that:

Name, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CANDIDA ALBICANS TFIIIA GENE (CatfIIIA) AND THE CODED
CATFIIIA PROTEIN

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

Nov. 9, 1999

as United States Application Number or PCT International

Application Number

PCT/FR99/02739

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| 98/14147 | France | 11/10/98 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| PCT/FR99/02739 | France | 11/9/99 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto. |
|-----------------------|--------------------------|--|
| | | |

(Page 1 of 5)

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(January 1997)

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application Number | PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--------------------------------|-------------------|---------------------------------|--------------------------------------|
| | | | |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

| Name | Registration Number | Name | Registration Number |
|------------------------------|---------------------|------|---------------------|
| Charles A. Muserlian | 19,683 | | |
| Jordan B. Bierman | 18,629 | | |
| Donald C. Lucas | 31,275 | | |
| Bierman, Muserlian and Lucas | 18,818 | | |

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

| | | | |
|-----------|-------------------------------------|-------|-----------------------|
| Name | <u>Bierman, Muserlian and Lucas</u> | | |
| Address | | | |
| Address | <u>600 Third Avenue</u> | | |
| City | <u>New York</u> | State | <u>New York</u> |
| Country | <u>U.S.A.</u> | ZIP | <u>10016</u> |
| Telephone | <u>(212) 661-8000</u> | Fax | <u>(212) 661-8002</u> |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|----------------------|-----------------|----------------|--|-------------|-----------------------|----------------------|--|
| Given Name | <u>FLORENCE</u> | Middle Initial | | Family Name | <u>BORDON-PALLIER</u> | Suffix e.g. Jr. | |
| Inventor's Signature | | | | | Date | <u>23 April 2001</u> | |

| | | | | | | | |
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| City | <u>Guyancourt</u> | State | | Zip | <u>F-78280</u> | Country | <u>France</u> |

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

Please type a plus sign (+) inside this box → ☒

146.1365

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet



| | | | | | | | |
|--|---|----------------|----|---|----------|-------------|--------|
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Sylvie | Middle Initial | | Family Name | CAMIER | Suffix | |
| Inventor's Signature | <i>Sylvie</i> | | | | Date | 25 May 2001 | |
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| Post Office Address | 66, Oakmont Avenue | | | | | | |
| City | Piemont | State | CA | Zip | 94610 | Country | USA |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | Andre | Middle Initial | | Family Name | SENTENAC | Suffix | |
| Inventor's Signature | <i>Andre</i> | | | | Date | 4 May 2001 | |
| Residence: City | Gif sur Yvette | State | | Country | France | Citizenship | FR |
| Post Office Address | Service de Biochimie et Genetique Moleculaire Bat | | | | | | |
| Post Office Address | 142 CEA/SACLAY | | | | | | |
| City | Gif sur Yvette | State | | Zip | F-91191 | Country | France |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | | Middle Initial | | Family Name | | Suffix | |
| Inventor's Signature | | | | | Date | | |
| Residence: City | | State | | Country | | Citizenship | |
| Post Office Address | | | | | | | |
| Post Office Address | | | | | | | |
| City | | State | | Zip | | Country | |
| Name of Additional Joint Inventor, if any: | | | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | | | |
| Given Name | | Middle Initial | | Family Name | | Suffix | |
| Inventor's Signature | | | | | Date | | |
| Residence: City | | State | | Country | | Citizenship | |
| Post Office Address | | | | | | | |
| Post Office Address | | | | | | | |
| City | | State | | Zip | | Country | |

☐ Additional inventors are being named on supplemental sheet(s) attached hereto